## L21000227474

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(City/State/Zip/Phone #)
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(Document Number)
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## **COVER LETTER**

Registration Section

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mail Com for future annual report notification)	
S63) 517-2864 Area Code Daytime Telephone Number	
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Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	
	5.00 Filing Fee & S60.00 Filing Fee, ertified Copy Certificate of Status dditional copy is enclosed) Certified Copy (additional copy is enclosed)  Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sikes Site Work  (Name of the Limited Liability Compa (A Florida Limited)	any as il now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L2\660227474	were filed on 511712021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
Si hes Site Work LLC	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abpreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	4395 Dana Robert To La Belle Fl. 33935
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4395 Dana Rotts & U Labelle Fl. 33935
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registere
Name of New Registered Agent: CONY	J. Sihes
New Registered Office Address: 4395	Enter Florida street address
LaBell	
New Registered Agent's Signature if changing Registered Agents	•

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

.If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Effective date, if other that an effective date is listed, the date inserted in the locument's effective date on	this block does not m	neet the applicab	date of filing or me le statutory filing	ore than 90 days af g requirements, t	<b>tional)</b> der filing.) Pi his date wi	ursuant to 60 II not be li	05,0207 ( sted as t
	Tective date, but not	an effective time	e, at 12:01 a.m. c	on the earlier of:	(b) The 9	00th day af	ter the
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record specifies a delayed ef d is filed. Dated (6/25/7)	Gr	The member or authorize	yed representative	of a member			